

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.
10/584,656
APPLICANT(S)

FILING DATE

CLAIMS

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT			AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
	1							51					
2		1						52					
3		2						53					
4		2						54					
5		2						55					
6		2						56					
7	1							57					
8		1						58					
9		1						59					
10		1						60					
11		1						61					
12		1						62					
13		1						63					
14		1						64					
15		1						65					
16		1						66					
17								67					
18								68					
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44								94					
45								95					
46								96					
47								97					
48								98					
49								99					
50								100					
TOTAL IND.	1												
TOTAL DEP.	9												
TOTAL CLAIMS	10												